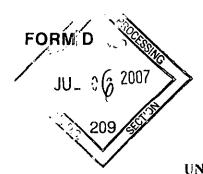
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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

· · · · · · · · · · · · · · · · · · ·					
OMB Number:	3235-0076				
Expires:					
Estimated averag	e burden				
hours not recoon	. 16.00				

SEC	USE ONLY
Pretix	Serial
DA	TE RECEIVED

Filing Under (Check box(es) that apply):	DUST CHARLES WITH MARKET WITH WARRENCE
A. BASIC IDENTIFICATION DATA	
1 Enter the information requested about the issuer	
Name of Issuer t [] check if this is an amendment and name has changed, and indicate change)	07070534
KD Resources, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
14655 Champion Forest Drive, No. 804, Houston, Texas 77069-1400	(281) 732-9169
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
KD Resources is an oil and gas exploration, development and production company.	
	PROCESSE
business trust [limited partnership, to be formed	1111 4.2 0000
Month Year Actual or Estimated Date of Incorporation or Organization: 0 4 6 7 Actual Esti	PUL 1 Z ZUU/
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; PN for other foreign jurisdiction)	/ THA
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File—A notice must be filed no fater than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given twhich it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549,
Copies Required Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repethereto, the information requested in Part C , and any material changes from the information previously support be filed with the SEC.	
Filing Fee. There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the care to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
— ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

A.BASIC IDENTIFICATION DATA Enter the information requested for the following Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply Executive Officer Promoter Heneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Dorman, James T. Business or Residence Address (Number and Street, City, State, Zip Code) 8607 Asprey Court, Spring, Texas 77379 Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter General and/or Director Managing Partner Full Name (Last name tirst, if individual) Dorman, James H. Business or Residence Address (Number and Street, City, State, Zip Code) 14655 Champion Forest Drive, No. 804, Houston, Texas 77069-1400 Promoter Check Box(cs) that Apply. Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Kostiner, Barry Business or Residence Address (Number and Street, City, State, Zip Code) 189 McNamara Road, Spring Valley NY 10977 Promoter Check Box(es) that Apply Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(cs) that Apply: Promoter General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Check Box(es) that Apply: Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Check Box(es) that Apply Promoter Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	1				В. 1	NFORMAT	ION ABOU	T OFFERI	NG				
	Man sha	issuer sold	or done d			II to non n	annutit ut l		this affini	n a9		Yes	Хo
l.	rias die	122HCL 2010	, or uves u			ii, to non-a Appendix.						C	
2.	What is	the minimu	ım investu					· -				s	
												Yes	No
3.		e offering p	=		-								
4.	commission or similar remaneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be fisted is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full	Name (Last name f	irst, if indi	(vidual)									
Bus	iness or	Residence i	Address (N	umber and	l Street, C	ity, State, 7	Sip Code)	TE			····		
Nan	ne of As	sociated Bro	ker or De	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						·
	(Check	"All States'	or check	individual	States)				***************	********	*******	□ All	1 States
	AL II. MT RI	AK IN NE SC	AZ IA NV SD	AR KS NII TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL M1 OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (Last name f	irst, if indi	ividual)		4 - Harishiya <u>— — — — — — — — — — — — — — — — — — —</u>		Bhi Mhichil Idam, yambaminin yardana	110 110 mmanu (0,0 \$1,0 \$1,0 \$1				
Bus	iness or	Residence	Address (?	Vumber an	d Street, C	City, State.	Zip Code)					<u></u>	
Nar	ne of As	sociated Bro	oker or De	aler									
Stat	es in W	iich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States"	or check	individual	States)	*******	**;;**********	************	,··-·			ام 🖂	l States
	AL IL MT RI	AK IN NE SC	AZ IA NY SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OU WV	GA MN OK WI	MS OR WY	MO PA PR
Full	l Name (Last name f	irst, if indi	ividual)				****					
Bus	iness or	Residence	Address (?	Number an	d Street, C	ity, State,	Zip Code)	***************************************					
Nan	ne of As	sociated Bro	oker or De	aler									
Stat	les in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States"	" or check	individual	States)				,***,	,			l States
	AL II. MT	AK IN NE SC	IA NV SD	AR KS NII IN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u> </u>	\$
	Equity	<u> </u>	\$
	Common Preferred	00 750 000 00	22.750.000.00
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify)		
	Total	22,750,000.00	<u>\$_22,750,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines, Enter "0" if answer is "none" or "zero,"	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 22,750,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	<u></u>	\$
	Answer also in Appendix. Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		s
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_157.272.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	- F1	§ 157,272.00

	C. OFFERING PRIC	E, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
	and total expenses furnished in response to l	gate offering price given in response to Part C — Question Part C — Question 4.a. This difference is the "adjusted grant C — Question 4.a. This difference is the "ad	oss	\$22,592,728.00
5.	each of the purposes shown. If the amou	gross proceed to the issuer used or proposed to be used int for any purpose is not known, furnish an estimate a le total of the payments listed must equal the adjusted grown to Part C — Question 4.b above.	nd	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ე\$	S
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Purchase, rental or leasing and installatio		-	_
		s und facilities		
	Repayment of indebtedness		🗌 \$	_ [] \$
	Other (specify):			
			- 🗆 \$	_ [s
	Column Totals	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	s 0.00	\$ 22,592,728.0
	Total Payments Listed (column totals add	led)	§ <u>2</u>	2,592,728.00
_		D. FEDERAL SIGNATURE		
sig	nature constitutes an undertaking by the issu	ed by the undersigned duly authorized person. If this notice to furnish to the U.S. Securities and Exchange Common-accredited investor pursuant to paragraph (h)(2) of	míssion, upon writt	
ss	uer (Print or Type)	Signature	Date	
Κſ	O Resources, LLC	B. Kostiner	July3/	07
	me of Signer (Print or Type) rry Kostiner	Title of Signer (Print or Type) Manager	<i>- 0</i> —	

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	<u>*</u>	E. STATE SIGNATURE								
l.	* * *	230.262 presently subject to any of the disqui								
		See Appendix, Column 5, for state res	ponse.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239,500) at such times as required by state law.									
3.	The undersigned issuer hereby un issuer to offerees.	idertakes to furnish to the state administrators,	upon written request, information furnished by the							
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	uer has read this notification and kno thorized person.	ws the contents to be true and has duly caused th	is notice to be signed on its behalf by the undersigned							
Issuer (Print or Type)	Signature & V. T.	Date							
KD Res	sources, LLC	B. Kostines	July 3/07							
Name (Print or Type)	Title (Print or Type)	Title (Print or Type)							

Manager

Instruction:

Barry Kostiner

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures

	APPENDIX									
1	Intend to non-a investor	to sell ecredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 investor and rchased in State C-Item 2)		under Sta (if yes, explana	ification ne ULOE attach ation of granted)	
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No	
ΛL										
AK										
ΛZ								:		
AR										
СЛ										
со										
СТ										
DE	-	1								
DC										
FL										
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MD									<u></u>	
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MN										
MS										

APPENDIX									
	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pui	4 Tinvestor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ								ſ <u>.</u>	
NE									
ΝV									
NH								,	
ŊJ		•	\$22,650,000; Convertible Debt	1	\$22,650,000.				
NM									
NY									
NC									
ND									
ОН									
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OR	f								[,
PA									
RI									
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WA									
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1 2 3 Type of securit and aggregate offering price investors in State offered in state				Type of investor and					lification ate ULOE attach ation of
		s in state	(Part C-Item 1)		amount purchased in State (Part C-Item 2)			waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

END